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01/17/01
JC685 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 836]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed Sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets]
5. Oath or Declaration [Total Pages 5]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 17 completed)
 - c. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76. (13 pages).
The entire disclosure of all applications claimed for priority on the Application Data Sheet are considered a part of the disclosure of the present application and are hereby incorporated by reference in their entirety.

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-Part (CIP)
Prior application information: Examiner _____

of prior application No: _____ / _____
Group/Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.**18. CORRESPONDENCE ADDRESS**

Customer Number or Bar Code Label 22195 or Correspondence address below

NAME				
ADDRESS				
CITY		STATE		ZIP CODE
COUNTRY		TELEPHONE		FAX
NAME (Print/Type)	Registration No. (Attorney/Agent) <u>40,302</u>			
SIGNATURE	<u>Lucile K. Hoover</u> Date <u>1/17/2001</u>			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

Revised

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FEE TRANSMITTAL for FY 2001 <i>Patent fees are subject to annual revision.</i>					<i>Complete if Known</i>					
					Application Number Unassigned					
					Filing Date Herewith					
					First Named Inventor Rosen et al.					
					Examiner Name Unassigned					
					Group Art Unit Unassigned					
Total amount of payment			(\$) 902.00		Attorney Docket Number PJZ02					
METHOD OF PAYMENT (CHECK ONE)										
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number 08-3425										
Deposit Account Human Genome Sciences, Inc. Name										
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17										
<input type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27										
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 08-3425										
FEE CALCULATION										
1. BASIC FILING FEE										
Large Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description	Fee Paid					
101	710	201	355	Utility filing fee	710					
106	320	206	160	Design filing fee						
107	490	207	245	Plant filing fee						
108	710	208	355	Reissue filing fee						
114	150	214	75	Provisional filing fee						
Subtotal (1)					\$710					
2. EXTRA CLAIM FEES										
Total claims	24	- 20**	4	Extra from below	Fee Paid					
Indep.claims	4	- 3**	1	80	\$ 80.00					
Multiple Dependent					\$					
Other fee (specify): Other fee (specify):										
*Reduced by Basic Filing Fee Paid										
Large Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description						
103	18	203	9	Claims in excess of 20						
102	80	202	40	Independent claims in excess of 3						
104	270	204	135	Mutliple dependent claim						
108	80	209	40	**Reissue independent claims over original patent						
110	18	210	9	**Reissue claims in excess of 20 and over original patent						
Subtotal (2)					(\$) 152.00					
Submitted By					<i>Complete if applicable</i>					
Name (Print/Type) Kenley K. Hoover					Registration No. 40,302					
Signature: <i>Kenley K. Hoover</i>					Telephone 301-610-5771					
					Date 11/17/2001					